KEITH E. RUSSELL ASSESSOR



OFFICE OF THE MARICOPA COUNTY ASSESSOR

REQUEST TO COMBINE

(For Taxing Purposes Only)

Depending on Property characteristics of parcels involved: there could be a change in land values for the resulting parcel (s).				
OWNER (S):			_DATE:	
ADDRESS:			_ () DAYTIME PHONE	
CI	TY: STATE:	ZIP:		
PARCEL NUMBER (S):				
I/We Request that the above parcels be combined into a Single Parcel for Tax Purposes. In order for parcels to be combined they must also meet the following specific qualifications:				
A.	Be contiguous (Common lines and Corners)			
B.	Have same Tax Area Code (School District, City/County, Special Districts, if any)			
C.	C. Have same ownership (No Sales agreements or other parties on any single parcel)			
D.	O. All covered by a single mortgage or all free from mortgage			
E.	. Must NOT be part of a Horizontal Property Regime (Condo) unless recorded proof of abandonment of whole complex is submitted.			
READ THIS BEFORE SIGNING By signing below I/we acknowledge that to secure a permit on the above, requires the recording of a single deed describing all parcels contained here in, as one (1) single legal description or parcel.				
	ed by Deputy Assessor (602)506-1075	Signed by Owner (s) Rev: 3-08-05 cb		

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